

COMMONWEALTH OF KENTUCKY
EMPLOYEE'S AFFIDAVIT

STATE OF KENTUCKY, COUNTY OF _____

I, _____, being first duly sworn and mindful of the laws and penalties of perjury, state the following:

(1) I was discharged from my position with the Department of _____ on _____, and was ordered to return to work on _____.

(2) At the time of my discharge, my salary was \$ _____ per month, my pay being \$ _____ per hour.

(3) List all employment engaged in during period of suspension in complete detail; including employer, period of employment, hourly wages, hours per week; with overtime separately designated. Also include total amount earned during the period of suspension with all W-2 Forms or a certified statement from the employer verifying the amount earned (See attached sheet to be completed in detail.)

(4) If self-employed during the period of suspension, state on the sheet below the type of employment, period of employment, place and amount earned. Also state whether this self-employment was engaged in prior to the period of suspension/dismissal. To verify the requested information, include copies of _____ through _____ State and Federal Tax Returns.

Type of Employment: _____

Period of Self-Employment: _____

Place of Self-Employment: _____

Was the self-employment engaged in prior to the period of suspension? _____

NOTE: To verify the requested information on self-employment, include copies of _____ through _____ State and Federal Income Tax Returns.

(5) During the period of my discharge, I was unavailable or unable to work at my position with the Department of _____ during the following period:

Reason:

Date From: _____ Date To: _____

(6) During the period of my discharge, I [sought] [did not seek] other employment. (Mark out which is not true.)

If your response to question #6 indicates an attempt to secure other employment, enumerate the instances on the form below:

Place employment was sought:

Name of firm contacted along with the individual with whom you spoke:

Date:

Type of employment sought:

Was the job offered as a result of your interview?

Place employment was sought:

Name of firm contacted along with the individual with whom you spoke: _____

Date: _____

Type of employment sought: _____

Was the job offered as a result of your interview? _____

Place employment was sought: _____

Name of firm contacted along with the individual with whom you spoke: _____

Date: _____

Type of employment sought: _____

Was the job offered as a result of your interview? _____

Place employment was sought: _____

Name of firm contacted along with the individual with whom you spoke: _____

Date: _____

Type of employment sought: _____

Was the job offered as a result of your interview? _____

(7) I [have] [have not] earned other income during the period of my discharge, except as stated herein. (Mark out which is not true.)

(8) During the period of my suspension, I received \$ _____ from the Unemployment Compensation Fund, \$ _____ from Social Security, and \$ _____ from the State Retirement Fund. (Explain in complete detail on an attached sheet.)

The foregoing and attached statements are true to the best of my knowledge. Subscribed and sworn to me by _____, on this the _____ day of _____.

Notary Public

(ATTACHMENT)

(3) Form to be filled out by those employed by others during the period of suspension:

Employer: _____

Date From: _____

Date To: _____

Rate of Hourly Pay: _____

Hours Per Week Worked: _____

Overtime Worked: _____

Total Amount Earned: _____

Employer: _____

Date From: _____

Date To: _____

Rate of Hourly Pay: _____

Hours Per Week Worked: _____

Overtime Worked: _____

Total Amount Earned: _____

NOTE: Also attach W-2 Forms or a certified statement from your employer(s) covering the period of employment.